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Research article

Strong Communities for Children: Results of a multi-year community-based initiative to protect children from harm[☆]

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ABSTRACT

This article reports the evaluation results from Strong Communities for Children, a multi-year comprehensive community-based initiative to prevent child maltreatment and improve children's safety. The outcome study consisted of a survey of a random sample of caregivers of children under age 10 in the Strong Communities service area and a set of comparison communities matched at the block group level on demography. Survey data were collected in two waves 4 years apart. Data were collected on (a) perceptions of the neighborhood and neighbors (e.g., neighboring, collective efficacy), (b) perceptions of neighbors' parenting practices, (c) parental attitudes and beliefs (e.g., parental stress; parental efficacy), and (d) self-reported parenting practices. The survey data were supplemented by data on substantiated reported rates of child abuse and neglect per 1,000 children and ICD-9 coded child injuries suggesting child abuse and neglect per 1,000 children. Compared to the non-intervention sample across time, the Strong Communities samples showed significant changes in the expected direction for social support, collective efficacy, child safety in the home, observed parenting practices, parental stress, parental efficacy, self-reported parenting practices, rates of officially substantiated child maltreatment, and rates of ICD-9 coded child injuries suggesting child maltreatment. These promising results, obtained through multiple methods of evaluation, confirm that a community mobilization strategy can shift norms of parents' care for their children and neighbors' support for one another, so that young children are safer at home and in the community. Replications should be undertaken and evaluated in other communities under diverse auspices.

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Introduction

This article reports the outcomes of Strong Communities for Children, a multi-year, comprehensive community-based initiative to prevent child maltreatment and improve children's safety. As described in detail elsewhere in this special section (Kimbrough-Melton & Melton, 2015), Strong Communities was the first large-scale effort to implement strategies proposed

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in the 1993 report of the U.S. Advisory Board on Child Abuse and Neglect. It is one of the largest community-wide initiatives ever undertaken for the purpose of improvement of children's safety in the United States.

In 1990, the U.S. Advisory Board declared a national emergency in child protection. Citing the failure of the prevailing policy emphasis on reporting and investigation and building on systematic reviews of pertinent research, some of which it commissioned (see [Melton & Barry, 1994](#); [Melton, Thompson, & Small, 2002](#)), the [U.S. Advisory Board \(1990, 1991, 1993\)](#) designed and advocated a new national strategy that would build a neighborhood-based child protection system to support families and make child protection a shared responsibility. To be effective, the Board argued, child protection must become a part of everyday life, so that it is embedded, seemingly naturally, in the social fabric—an ordinary function of the settings in which children and their families live, study, work, worship, and play (see [Kimbrough-Melton & Melton, 2015](#), for elaboration of the Board's logic and the empirical foundations for its assumptions; see also [Kimbrough-Melton & Campbell, 2008](#); [McLeigh & Melton, in press](#)).

The Board did not harbor any illusion that such a transformative shift in perspective would be easy. Indeed, the Board noted that “the reversal of negative social momentum requires diligent efforts to inject resources and to facilitate the development of neighborhood leadership” ([U.S. Advisory Board, 1993](#), p. 22).

Elaborating this point, the Board observed:

... Some neighborhoods have become sufficiently impoverished, both economically and socially, that few resources of any kind are available. In such neighborhoods, not only is there no major industry, but there also may be no Rotary Club or Kiwanis Club and indeed no grocery stores, banks, and other basic amenities. The neighborhood may lack grassroots organizations of any sort, and individual neighbors also may feel drained of both emotional and economic resources that might be shared. ([U.S. Advisory Board, 1993](#), p. 22)

The focus on neighborhoods has special significance for families of limited wealth, because their reach beyond nearby settings may be constrained because of the cost of transportation and relatively limited connections through work with relatively distant colleagues and classmates. Unfortunately, the people who have the least economic wealth are also apt to have the least social resources. However, young parents, even those who are well educated and headed for professional careers, are in an age group that is experiencing exceptional financial challenges, in relation to prior generations, and that is correspondingly distrustful and disconnected ([McLeigh & Boberiene, in press](#); [Taylor, 2014](#); [Twenge, 2006](#)).

In our own work ([McDonell, Lavenda, & Waters, 2010](#)), nearly one-half of parents of young children in metropolitan areas of South Carolina in the mid-2000s were isolated (e.g., they did not know whom they would contact for emergency child care). About 1 in 6 of the isolated parents were college graduates, and a similar proportion had a family income greater than \$70,000. Thus, social poverty is an especially striking concern for families dealing with economic poverty or near-poverty. However, it is also an issue for many young families who are financially advantaged relative to their age-peers but who often are financially disadvantaged relative to prior generations of comparable social backgrounds.

Accordingly, the Board's top-priority recommendation on release of its neighborhood-based strategy was for concerted action by federal agencies and private foundations to “establish a large-scale demonstration program of *Prevention Zones*—comprehensive efforts to improve the social and physical environments in declining neighborhoods with high rates of child maltreatment” ([U.S. Advisory Board, 1993](#), p. 23). The Board specified (a) that such initiatives should be undertaken in neighborhoods of diverse “geography [region], population density, and ethnicity,” (b) that “the trials should be closely monitored and rigorously evaluated,” and (c) that the principles emerging from such research should be used to design “a large-scale national effort within five years” (p. 23). Although the Board's recommendation was not implemented in the near term, the report altered the framework for discussing child protection policy and contributed to the development of other child protection strategies ([Krugman & Leventhal, 2005](#); [Melton, 2002](#)).

Over the two decades that followed, the formal child protection system continued to pursue a strategy of mandated reporting and investigation of child maltreatment. This approach satisfied the legal obligations of child protection legislation but did little to support family change and nothing to ameliorate the conditions that led to an allegation of maltreatment in the first place ([Melton, 2005](#)). Although community-based prevention and support programs have sought to fill the gap, they have commonly adopted individual-level strategies and have given scant attention to the broader context ([McDonell & Melton, 2008](#)). As a result, the [U.S. Advisory Board's \(1993\)](#) call to action to transform communities into settings marked by collective responsibility for family support and child protection remained an elusive dream.

The Implementation of Strong Communities for Children

Then in 2002, The Duke Endowment, a supporter of community-based efforts to prevent child maltreatment, funded a multi-year trial of the [U.S. Advisory Board's \(1993\)](#) recommendations. The resulting initiative, named Strong Communities for Children, sought to strengthen communities so that *every child and every parent would know that if they had reason to celebrate, worry, or grieve, someone would notice, and someone would care.*

The initiative was implemented in a diverse urban, suburban, and rural area in parts of two counties in the Upstate region of South Carolina. In 2000, the population consisted of almost 125,000 people living in an area covering about 200 square miles. The census indicated the presence of 35,137 families; 13.4% had children under the age of 6 ([U.S. Bureau of the Census, 2000](#)).

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